

Distance Learning Evaluation Sheet - Today's Topic _____

Location of training _____
City State

Today's date _____ / _____ / _____
Month Day Year

The following questions refer to the training you just received. Please respond using the scale provided, marking with an **X** the circle corresponding to your response.

1. How well did you know this material before beginning the course?

Not at all

1	2	3	4	5
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 Very well

2. How much more did you learn about this topic?

None

1	2	3	4	5
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 A lot more

3. How often do you expect to apply this knowledge in the next 30 days?

Never

1	2	3	4	5
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 Often

4. Have you had a previous course on today's topic? Yes ☐ No ☐

5. About how many other interactive TV events similar to this have you previously participated in?

	None	1 or 2	3 or 4	5 to 10	10 or more
For your job?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
For your education?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
For other interests (hobbies, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. Please respond to the following questions using the five-point scale, with 1 being "Poor" and 5 being "Excellent." From your vantage point during the training, how would you rate:

	Poor	1	2	3	4	5	Excellent
Location of the video screen:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Quality of the audio:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Quality of the video:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Effectiveness of instructors:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Opportunity to ask questions:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Responsiveness to student questions:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Relevance of course to your job duties:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Overall effectiveness of instruction:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

7. Did you receive this training at your regular workplace? ☐ Yes ☐ No (If no answer #8)

8. How long did it take you to get from your workplace to today's training site:

☐ 1-29 minutes ☐ 30-59 minutes ☐ 1-1.5 hours ☐ more than 1.5 hours

If you have any comments, please write them on the back of this form.